

DOCKET NO. PRD-0007-US-CIP  
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Andrew Joseph Friedman et al.

Serial No.: 10/626,434

Art Unit: 1615

Filed : July 24, 2003

Examiner: N/A

For : EXTENDED TRANSDERMAL CONTRACEPTIVE REGIMENS

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

January 26, 2004

(Date of Deposit)

Joseph S. Kentoffio

(Name of applicant, assignee, or Registered Representative)

(Signature)

January 26, 2004

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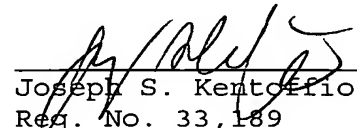
SUBMISSION OF COMBINED DECLARATION AND POWER OF ATTORNEY

Dear Sir:

Pursuant to Rule 53(f) and Rule 54, please find enclosed a Combined Declaration and Power of Attorney for the application of Andrew Joseph Friedman et al. entitled EXTENDED TRANSDERMAL CONTRACEPTIVE REGIMENS attorney Docket No. PRD-0007-US-CIP, to complete, pursuant to Rule 51, this application filed on July 24, 2003 by Express Mail pursuant to Rule 10. As required, a copy of the Notice to File Missing Parts of Nonprovisional Application is also attached.

Please charge Johnson & Johnson Deposit Account No. 10-0750/PRD-0007/JSK in the amounts of \$130.00 for submission of the Declaration pursuant to Section 1.16(e). The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Account No. 10-0750/PRD-0007/JSK. This sheet is submitted in triplicate.

Respectfully submitted,

  
Joseph S. Kentoffio  
Reg. No. 33,189  
Attorney for Applicant(s)

Johnson & Johnson  
One Johnson & Johnson Plaza  
New Brunswick, NJ 08933-7003  
(732) 524-3711  
Customer No. 000027777



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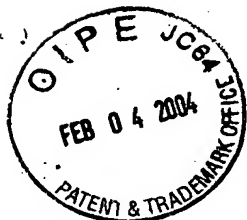
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A handwritten signature in dark ink, appearing to read "Joseph S. Kentoffio", written over a horizontal line.

(Signature)

January 26, 2004

(Date of Signature)

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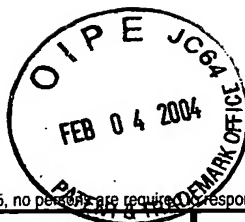
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Reg. No. 33,189  
Attorney for Applicant(s)

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New Brunswick, NJ 08933-7003  
(732) 524-3711  
Customer No. 000027777

Please type a plus sign (+) inside this box ☐



PTO/SB/01 (10-00)  
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**DECLARATION  
AND  
POWER OF ATTORNEY  
FOR UTILITY OR DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing **OR** ☒ Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)

Attorney Docket Number PRD-0007-US-CIP

First Named Inventor Andrew Joseph Friedman

**COMPLETE IF KNOWN**

Application Number 10/626,434

Filing Date 07/24/2003

Group Art Unit 1615

Examiner Name N/A

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**EXTENDED TRANSDERMAL CONTRACEPTIVE REGIMENS**  
(Title of the Invention)

the specification of which

☐ is attached hereto

**OR**

☒ was filed on (MM/DD/YYYY) 07/24/2003 as United States Application Number or PCT International Application Number 10/626,434 and was amended on (MM/DD/YYYY) ☐

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

### DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
10/385,597	March 11, 2003	Pending Patented Patented

I hereby appoint:

☒ Practitioners at Customer Number **000027777** →

Place Customer  
Number Bar Code  
Label Here

AND

☐ Practitioner(s) named below:  
Name Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to Joseph S. Kentoffio at telephone number (732) 524-3711.

Direct all correspondence to: Customer Number ☒ or Bar Code Label **000027777** OR ☐ Correspondence address below

Name:

Address:

Address:

City:

State:

ZIP

Country

Telephone:

Fax:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) Andrew Joseph

Family Name  
or Surname Friedman

Inventor's  
Signature

*Andrew Joseph Friedman*

Date

1/13/04

Residence: City Princeton

State NJ

Country USA

Citizenship USA

Mailing Address 12 Winfield Drive

City Princeton

State NJ

ZIP 08540

Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) Katherine D.

Family Name  
or Surname LaGuardia

Inventor's  
Signature

*Katherine D. LaGuardia*

Date

1/15/04

Residence: City New York

State NY

Country USA

Citizenship USA

Mailing Address 9 Gracie Square

City New York

State NY

ZIP 10021

Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any])

Family Name  
or Surname

Inventor's  
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

City

State

ZIP

Country